

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	N.A		05/15/01
O.I.P.E. CLASSIFIER		W5W	6/01/01
FORMALITY REVIEW	fa	720	07-09-01
RESPONSE FORMALITY REVIEW	Em	927	10-18-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	3/1/02
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
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41	✓
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44	✓
45	✓
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47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
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Claim	Date
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ll  
 7/10  
 301  
 10-16-1

If more than 150 claims or 10 actions  
 staple additional sheet here

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